PTO/SB/06 (08-03)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information united the PATENT APPLICATION FEE DETERMINATION RECORD									Application or Docket Munaber		
Substitute for Form PTO-875											
CLAIMS AS FILED – PART I (Column 1) (Column 2)							SMALL E	NTITY	OR	OTHER THAN SMALL ENTITY	
				REXTRA		RATE	FEE		RATE	FEE	
BASIC FEE (37 CFR 1.16(a))							3	OR		<u>; 750</u>	
TOTA	L CLAIMS FR 1.16(c))	3	3 minus 20 = .			x	s=		OR	x \$=	
INDE	PENDENT CLAIMS FR 1.16(b))	13	3 minus 3 = ·			×	s=	<u> </u>	OR	× \$=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+	s=		OR	+ \$=	
* If the difference in column 1 is less than zero, enter "0" in column 2.										750	
											R THAN
		(Column 1)		(Column 2)	(Column 3)	_	SMALL	ENTITY	1 :	SMALL	ENTITY
þ	3/31/05	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL EEE		RATE	ADDI- TIONAL FEE
ME	Total (37 CFR 1.16(c))	7	Minus	20	= 0	×	s=	(OR	x \$=	NO
AMENDMENT	Independent (37 CFR 1.16(b))	3	Minus	3	= 🔿	×	\$=		OR	x \$=	158
₽	FIRST PRESENTAT	ION OF MULTIPLE	DEPENDE	NT CLAIM (37 CF	R 1.16(d))	+	s <u> </u>		OR	+ \$=	DUE
							OTAL DD'L FEE	5	OR	TOTAL ADD'L FEE	-0_
		(Column 1)		(Column 2)	(Column 3)	1 -		T	7		Ι
ΙN		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	·	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ME		·	Minus	**	=	X	s=		OR	× \$=	
AMENDMENT		•	Minus	***	=		s =		OR	x s=	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					[,	· \$=		OR	+ \$=	
							OTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)	, <u>,</u>			٦		
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	*	Minus	**	=] [,	< s =		OR	× \$=	
		•	Minus	***	=	1 [,	< \$ =		OR	x \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))] [+ \$=		OR	+ \$=	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	• If the entry in co •• If the "Highest N	lumbar Draviauel	v Paid For	' IN THIS SPACE	: is less than 2\	n 3.), enter	"20".				_
.	If the "Highest N" If the "Highest N"	umber Previousi	y Paid For	IN THIS SPACE	is less than 3,	enter .).	in the annron	riaté box in	column 1.	_

"" If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter 3.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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Application or Docket Number

Palent and Tradament Office, U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003 **CLAIMS AS FILED - PART I** SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE [OR SMALL ENTITY **TOTAL CLAIMS** RATE FEE RATE FEE FOR NUMBER FILED **NUMBER EXTRA BASIC FEE** 375.00 BASIC FEE 750.00 OR TOTAL CHARGEABLE CLAIMS minus 20= A X\$ 9= X\$18= OR R INDEPENDENT CLAIMS ð minus 3 = X42= X84= 2 OR MULTIPLE DEPENDENT CLAIM PRESENT +140= +280= OR 0 * If the difference in column 1 is less than zero, enter "0" in column 2 OR TOTAL TOTAL n AIMS AS AMENDED - PART II OTHER THAN SMALL ENTITY SMALL ENTITY OR (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT RATE TIONAL TIONAL RATE AMENDMENT AFTER **PREVIOUSLY EXTRA AMENDMENT** PAID FOR FEE FEE 20 Total Minus X\$ 9= X\$18= OR independent Minus X42= X84= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= +280= OR TOTAL Elettiticolumn 2) TOTAL OR ADDIT. FEE ADDIT, FEE (Column 1) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT RATE TIONAL RATE TIONAL AMENDMENT AFTER **PREVIOUSLY EXTRA** AMENDMENT PAID FOR FEE FEE Total Minus 26 6 X\$ 9= X\$18= OR Minus 3 X42 =X84= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= **+280=** OR TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) Column 3) CLAIMS HIGHEST ADDI-REMAINING NUMBER ADDI-PRESENT AFTER **PREVIOUSLY** RATE TIONAL RATE TIONAL EXTRA AMENDMENT PAID FOR FEE FEE Ó Total Minus X\$ 9= X\$18= OR independent Minus X42= · X84= ЮR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= +280= OB If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20," OR ADDIT. FEE ADDIT. FEE ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3," The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

*U.S. Government Printing Office: 2003 - 498-278/69151

FORM PTO-875 (Rev. 12/02)